The MEDICAL MISSIONARY

DR. AGNES McLAREN
Pioneer of Medical Work by Women for Women in the Orient

Vol. V JUNE 1932 No. 9

Group of Medical Missionaries in Washington, D. C.

THE SOCIETY OF CATHOLIC MEDICAL MISSIONARIES, INC.

Foundation The Society of Catholic Medical Missionaries is a religious community which was founded in Washington, D. C., in September, 1925, with the approval of His Grace, Most Rev. Michael J. Curley, Archbishop of Baltimore.

Purpose of The Society The purpose of the Society is to work for the spread of our Holy Faith and to help the sick in foreign mission countries through the establishment of hospitals and dispensaries, medical schools, training schools for native nurses, infant welfare centers, plague camps, leper asylums and traveling dispensaries, and visiting the sick in their homes.

Fields of Labor *Rawalpindi, Punjab, India*—Holy Family Hospital for women and children, dispensary, and small training school for Indian nurses.

Dacca, Bengal—Training School for Indian nurses at Mitford Hospital. Two maternity and child welfare centers; training and supervision of native midwives and care of the sick in their homes.

Need of Vocations Vocations are very much needed, as the Society has many requests to start missions. Those who are desirous of devoting their profession to God in the service of the sick in the missions find ample scope for their generosity. The Society will also accept candidates who possess no medical qualifications, with a view either of training them in some branch of the profession after admission, or with a view of their devoting themselves to the non-medical work inevitably connected with the undertakings of the Society at home and abroad.

The requirements for admission are the same as for other religious communities.

Ways and Means of Helping All can contribute to help the sick in the missions, by prayer and also by material means. The latter in the form of:

Donations.
Annuities and bequests.
By donations in kind.
By joining the League of Gratitude.

The League of Gratitude The League of Gratitude was established with ecclesiastical approbation as an auxiliary to the Society. As its name implies, its motive is to express gratitude for the gifts of Faith and Health by bringing these gifts to the inhabitants of mission countries who are deprived of both.

Membership consists in praying for the missionary success of the work and in contributing a small annual donation. Members share in the benefits of the work and prayers of the Society.

Information regarding the Society may be obtained from Dr. Anna Dengel, Catholic Medical Mission House, Brookland, Washington, D. C., U. S. A.; or 24 Holland Street, London W. 8, England.

The MEDICAL MISSIONARY

Published with ecclesiastical approbation ten times a year by the Society of Catholic Medical Missionaries, Inc., Brookland, Washington, D. C., in the interest of Medical Missions and Women of the Orient. Subscription, $1 per year.
Editor: Dr. Anna Dengel. Telephone: Decatur 3161

"Entered as second-class matter September 11, 1928, at the post office at Washington, D. C., under the Act of March 3, 1879."

THE FIRST SEVEN YEARS

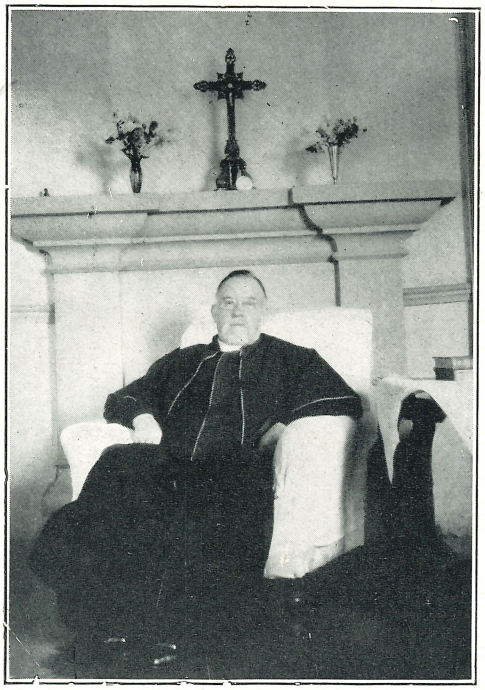
By Dr. Anna Dengel

THERE is no particular reason for summing up so to say the events and happenings of the first seven years of the existence of our Society, except that the period of seven pioneer years comprises and completes and rounds off a certain stage.

Above all, we must thank God for having brought us thus far and ask for His help and protection for the days to come.

The Beginning

Our Society did not spring up over night. It had deep foundations, which were laid about 30 years ago by Dr. Agnes McLaren, who was a pioneer in a double sense. She was one of the first women who obtained a medical degree, and she it was who, at the age of 72, went to India to see with her own eyes if medical care for the women of the Orient was such a charity and missionary opportunity as she had learned it to be from her Protestant friends before she became a convert. Not only was she convinced, but much more impressed by actually seeing. The result of her journey was the foundation of St. Catherine's Hospital in Rawalpindi, in the north of India. In London she organized a committee which was to be the foster mother of the hospital, so to say, and His Eminence, Cardinal Bourne, was its patron, and Lady Mary Howard the president for years.



Rt. Rev. R. Winkley (Mill Hill) Prefect Apostolic of Kashmir and Kafristan, who encouraged the founding of a Medical Mission Society and who played an important part in the establishment of our first hospital

Dr. McLaren was for a long time in search of a Catholic woman doctor to take charge of St. Catherine's Hospital, founded by her. Failing in this, she conceived the idea of appealing to religious communities of women to allow young nuns to study medicine for the missions. This she thought would solve the problem and provide the spiritual, missionary, professional, and financial desiderata, all in one stroke. So keen was she on this that she tried to interest Church dignitaries and other influential persons and that she actually went five times to Rome to further this project, as one community in Belgium had volunteered and Sir Bertram Windle, then president of the University College of Cork, had promised to make arrangements for nuns to study medicine there. However, this also came to naught, or rather was left suspended in mid-air, as no definite answer was given by Rome. Dr. McLaren, getting old, could not afford to wait on; so she proposed to start at the bottom. Perhaps, she thought, some young person somewhere would take up the study of medicine from a missionary motive. This idea worked and seems also to be the most promising method of recruitment for the future. The writer took up and completed the study of medicine in Cork and, after some experience in England, went to St. Catherine's Hospital for women and children founded by Dr. McLaren in Rawalpindi.

The hospital was conducted then by the Franciscan Missionaries of Mary, who for many years did most devoted and heroic work there under very difficult circumstances.

After a few years of work among the women of India, it became evident to the writer that there is a vast field of Christian charity among the women of the Orient. They are on the verge of emancipation for good or bad. For the greater

part, they are still deprived of proper medical care. To see this and to remain indifferent would be incompatible with the commandment: "Love thy neighbor as thyself." To come to their assist-

V. Rev. Michael A. Mathis, C.S.C., who helped in the foundation in the Society

ance in sickness and suffering, to enlighten them in matters of healthy living, to make prejudices disappear by friendly contact, and superstition die a natural death by showing them sane and sound ways of "help thyself and God will help you," will gradually clear their vision for the source which prompts this charity and make them more receptive for the truths and virtues of a Christian life.

Catholic hospitals, dispensaries, medical schools for women, training schools for native nurses and midwives, maternity and child welfare centers, leper clinics planted here and there would be so many centers radiating Catholic life.

Of course, a number of mission hospitals and a considerable number of dispensaries exist, but in comparison to the vastness of the field, they are very inadequate.

St. Catherine's, founded by Dr. McLaren, was one of the first. After about 20 years of useful work, it was found that the locality and the accommodation did not answer the purpose very well any more. The late Rt. Rev. Msgr. Winkley, then Prefect Apostolic of Kashmir and Kafristan, decided to build a new hospital in the native city where a new mission station was planned. With his approval and authorization, the writer went to the United States in 1924 partly to raise funds for the new hospital, but mostly to arouse interest in Medical Missions. On this tour she met Very Rev. Michael A. Mathis, Superior of the Holy Cross Foreign Mission Seminary in Washington, D. C., who had been interested in providing Medical Missionaries for the Holy Cross Mission in Bengal. In conjunction with him, the foundation of a new Society for the purpose was decided upon. The main stimulus to embark on the foundation of a new missionary Society for providing medical aid to the missions was the lack of one in which the members could combine life in a religious community with the practise of the medical and nursing professions in their full scope, including surgery and obstetrics, in order to help the people, especially the women, in all their medical needs.

The Constitutions were drawn up and presented to His Grace Most Rev. Michael J. Curley, Archbishop of Baltimore, who approved of the foundation of the Society on June 12, 1925.

According to the Constitutions, the Society was to be a religious Community whose members bind themselves to the practise of the evangelical counsels and devote themselves to the care of the sick in any field of labor assigned by the Superior.

Very Rev. Father Français, then Superior General of the Holy Cross Congregation, kindly permitted the priests of the Holy Cross Seminary in Washington to assume the spiritual care of the Society.

Providence soon provided recruits, a doctor and two nurses. In the course of seven years they were followed by 26 others. A small number

V. REV. FATHER FRANÇAIS
Superior General of the Holy Cross Congregation at the time when our Society was established

indeed, but beginnings are slow, as the old saying goes.

The pioneer members will give you a glimpse of how they fared since they came together to form the nucleus of a Society which then had nothing to offer to them except an opportunity to serve the sick and poor in the missions for the love and glory of God.

FIRST YEAR OF THE HOLY EXPERIMENT

By JOANNA LYONS, M.D.

THIS is how we began in Washington. First two of us came together in the early days of September, 1925. We sought for a house and found one in Brookland in the parish of St. Anthony, not too far from the establishments of the many religious orders that are settled there. Above all, it was reasonably convenient to the houses of the Congregation of the Holy Cross, our foster mother and guardian angel in all our beginnings. We paid the rent and moved in at once. The house contained one moveable: a broom; and we had nothing but our suit cases. But we were perishing to make a beginning, and the Lord provided, as usual.

Two or three weeks later two other aspirants arrived and community life and housekeeping began in earnest. It was a golden year. On September 30, the Blessed Sacrament was reserved in the tiny Chapel which henceforth was the heart of the house.

We kept house, taking turns. We had various adventures in the new jobs. Good health and good spirits abounded. I do not know that there were ever four women together who laughed more than we did in the early months of our being together. The exultant and amused stage passed off, but not the happiness of this new enterprise. It was a time of great hopes.

Of course, the external work was merely incidental. The great business of the year was the formation of the members in the ways of community life or, more properly, in the ways of the spiritual life. There were lectures and notebooks dealing with what might be called the machinery, the form and matter, the safe and sure paths of spirituality. The year of retirement and living together provided daily laboratory tests of the principles learned in the lectures and assimilated in the morning's meditation.

There were other classes, too, for studying Bengali and "Missionology" and Christian Doctrine. These, with the daily work of the house and the beginnings of organization and publicity work for the Society, filled the working hours. So sped the year until again September days brought the day when the first four members solemnly pledged themselves to the first period of service in the Society and received the Mission Cross.

In the fall of 1926 I was assigned to St. Catherine's Hospital, Rawalpindi, for a year, until the Holy Family Hospital would be ready.

First four members of the Society: Dr. Anna Dengel, Dr. Joanna Lyons, Sister Mary Laetitia, R.N., Sister Agnes Marie, R.N.

WHY I JOINED THE NEW SOCIETY

By SISTER MARY LAETITIA, R.N.

MANY years ago God gave me a very great grace, that of Conversion, and in return I felt I had to do something, for even though very young at the time, I realized, as I have always done since, what a tremendous thing it is to be numbered among the "Faithful."

I looked around and pondered how, having received so much, I could do something for others.

It was during the war, so I decided that I could do a little by joining a War Hospital and helping to nurse the "Wounded." It seemed a big sacrifice to make, but I was ready to do anything. I soon found myself installed in a big and, in many ways, terrible hospital, and, in spite of youth and inexperience, after some little instruction was busily engaged in nursing the "Wounded" in England.

Still I was not quite satisfied; then the idea came to me of taking General Training so that I might join a Nursing Order of Sisters.

The next step was to enter a general hospital. I was well on in the third year of training when what seemed like a calamity occurred. I was obliged to give it up and go to America. However, with the idea of still entering a Nursing Order, some time later, I again started training, at the bottom of the ladder. During this period the idea of entering a missionary as well as a nursing Order gained an ever-increasing hold over my mind. Much of this was due to contact with doctors or nurses who were studying or working for experience for the sole reason of giving their services to the Missions for Christ's sake—most of them Protestants. There was also a Student Volunteer League which used to hold meetings in the hospital, and they would occasionally produce a little Chinese or a little Indian lady who would make a very pitiful plea for workers for her particular country. Soon I began to think that by making a little bigger sacrifice I might be able to share my gift with those suffering under the yoke of paganism and ignorance.

The next problem was to find the right Order. (I was bound for Africa in my mind.) The Order did not seem to exist. Many were the Orders that did missionary work and nursing, but as the nursing seemed very often to be secondary to some other work, such as teaching, none of them appealed to me. Now what do so? Suddenly I heard of a Society whose aim was to devote itself entirely to medical work in the Missions. It did not then exist, but was soon to come into being with the idea of one day being on the same footing with the other active Orders of the Church, after it had proved itself. It was the very thing. My application was accepted, and I have been a very happy "Medical Missionary" from the day the Society took its first breath, on September 30, 1925.

THE FIELD OF ACTIVITY THAT FELL TO MY LOT AS A MISSION DOCTOR

By JOANNA LYONS, M.D.

The top end of India is in these years as interesting a place politically as there is in the whole world, perhaps. All about swirl the currents of clashing nationalist tendencies and antagonistic religious sects. Here we sit within the moving fringe of the British Empire, touching the borders of the stronghold of Mohammedanism of Central Asia, and beyond that the red flag is seen waving intermittently and threatening an advance some day. But in the midst of these striking historical events (could we but realize them) human life goes on as usual. We, too, who have come from without on a more important and urgent mission than that of any political agent, we also settle down to our job and our days run their appointed course, of prayer and work, and meals and rest intermingled with the daily small events that arise. We conduct a hospital with an outdoor department. That means that daily we must visit the sick within our walls and converse with the sick who come to the dispensary. We must help them as circumstances allow in their illnesses, and remind them that they and we and all things are in the hands of God. Somebody must mind the housekeeping; somebody must look after the operation room and sterilizing; somebody must make up the drugs and keep the books and teach the nurses. The doctor sees the indoor patients in the morning; she sits at a desk and prescribes for the outdoor cases; she goes out on occasion in the Ford into the homes of the city or into a village.

The accoutrements may differ, but the medical problems are much the same

The patients have veiled faces or noserings or velvet pantaloons or turned up shoes or other picturesque accoutrements, but the medical problems in the main are the medical problems of the homeland, a bit complicated by ignorance or such pernicious customs as the retention of the women in

seclusion deprived of normal fresh air, and the early marriage of the girls. The demands upon a doctor are varied. One must be surgeon, obstetrician, and internist every day. The resources of modern medicine are available here in a degree only, limited by shortage of money and personnel.

The work of the mission doctor here is not that of looking after lepers or averting cholera epidemics or treating plague cases. It is more that of a very varied general practice exercised with the purpose of winning souls to Christ. The women and children who come to us get, we believe, pretty good treatment. If they went to one of our neighboring Government hospitals they would also get pretty good treatment.

The value of the medical mission hospital lies not so much in giving good medical aid, though it does that, but in showing the religion of Christ in action. If the women coming to the mission hospital invariably find there persons to attend them who are sincere and honest, never harsh or careless, who are not influenced by the worldly standing of the patient, are always kind, who look upon all affairs from a supernatural viewpoint and so speak of them as befits Christians, then it can not be that the mission hospital will not fulfill its purpose to win souls to Christ.

FIELDS OF LABOR ASSIGNED TO ME IN INDIA

By SISTER MARY LAETITIA, R.N.

THE first was at the Holy Family Hospital in Rawalpindi, at the top of India.

We arrived one day in December and found the hospital not quite finished. It was bitter cold, but we all crept around a smoky fire and smiled at the idea we had previously formed of the blinding heat of India. A few months later we were not smiling at it.

The next day we all got busy and tried to fix up the wards, etc., and make the place look something like a hospital. Within a few days we opened our doors to the population of Rawalpindi with an invitation to visit the hospital.

Holy Family Hospital, Rawalpindi

Our first patient arrived and was given a four-bed ward. As she had *only* 14 relatives with her, she was inclined to complain that the quarters were very small. I wonder if they ever discovered that four patients were supposed to occupy that one ward? We kept that a dark secret. We were so pleased to have a patient that I think we would have altered the shape of the roof if she had found fault with it. Soon we had more patients coming than we could manage, so we had to think about training some nurses. The first two were Kashmiri beauties; both of them have married since. Neither finished training. They were too beautiful for us; we were glad to see them safely married. Later we tried again. Some of the nurses were really quite good, but on the whole one felt shell-shocked by the end of the day trying to see that they did their work more or less properly and did not get into mischief.

Owing to the fact of the hospital being Purdah, we always had to have curtains around each bed and were kept busy trying to see that the wind did not blow the curtain aside while the patient's husband of the next bed was visiting or that he accidently did not walk into the wrong section of the ward. Every patient always had at least half a dozen relatives trying to stay with her and each of the half dozen always had at least two or three children, so the congestion was often very acute, one that a traffic policeman would have had difficulty in solving. We made a firm resolve that only one relative might be permitted to stay, but it was no use; they would hide under the beds and in the beds and out in the garden until dark, and there was nothing to do but allow them to stay, as one can not turn a woman out in the streets in India after dark. Every patient used to bring her little stove and a sack of charcoal and vegetables, live chickens, etc., to last for several days. Not rarely, the chickens would be tied to the foot of the bed and live there quite

happily until discovered by us, when they would be banished to the garden in disgrace, only to find their way back to the foot of the bed a few minutes later.

Operations were always a great source of joy and excitement to everybody (except probably the one to be operated on). All the relatives of all the patients used to try to gather at the correct time, and if we allowed them, they would all have collected in the operating room. As it was, they followed the patient down the hall and then took turns of squatting down and gazing through the key-hole at what was going on inside. The others would climb up the sides of the operating room window outside and nearly screw their necks off, trying to see what was going on. Afterwards there was always a mad dash to the operating room to see if anything interesting came out of the patient's abdomen, etc.

Rawalpindi is a very interesting place in many ways. It is situated at the foot of the Himalaya hills; after a two-hour car ride we could be high up in the mountains as cool as cucumbers while the rest of the world would be baking down in the plains. I was quite sorry to be sent away in 1930.

The two Kashmiri Beauties

The next stop was the Child Welfare and Midwifery Supervision in Dacca, Bengal. It was a great change, both as regards the work and the climate. Rawalpindi is one of the hottest, driest places in India. Dry, sun-scorched plains, almost devoid of vegetation, stretch as far as the eye can see around the city. There is very little rain, everything dies for want of it, and the animals are a pitiable sight, for there is very little food for the poor things. Bengal is just the opposite. It is not nearly so hot, though at times rather a trying climate; we get more rain than we can comfortably use. Everywhere banana trees, mango trees, guava trees, and many other varieties flourish. All kinds of flowers and vegetation are present in great profusion. The animals are not nearly so badly off, except when everything is under water; sometimes we see cows, etc., that are quite fat.

Here for nearly two years I did Public Health work. It was interesting although rather discouraging at first, but towards the end of the last year we saw some little result of our work. As the mothers will not bring the babies to the two Centers that we have, we found it necessary to go to the homes. Needless to say, in this way we learned more of conditions than we would have, had the babies obligingly come to us. There are thousands and thousands of homes in Dacca, both rich and poor. Sister M. Helen is here with me. I think between us we have visited almost every one by now. We have several midwives working, and we usually see all their cases for the first few days and then try to revisit the mother and baby once, a month afterwards. At first we had an awful time finding the people, for there are very few street names in evidence and numbers were nil at first. Since then, most of the houses have been numbered, but the rain is washing the numbers off again. The gulies (lanes) wind in and out and are so narrow and tiny, and there are gulies within gulies which all look alike. However, after a few months we surmounted that difficulty and soon got so that we knew, without a moment's hesitation, where hundreds of Lal Miahs, Abdullahs, Hori Babus, Charu babus, etc., lived. Indeed, from driving the car so much, we soon came to know even the ruts in the road.

In addition to the Baby Welfare work, we also do quite a bit of antenatal work and also midwifery supervision. The midwives call us for all their abnormal cases, and we have to do many things that we would never dream of doing at home. Then there are the dais (the hereditary, untrained native midwives) who have to be taught—that is rather a hopeless problem. They are from the lowest castes and filthy and illiterate. How to get anything into their wooden heads is quite a problem. We teach and teach and demonstrate and coax and scold, but it is not of very much use. They can not understand the necessity of cleanliness, therefore they simply will not put our teaching into practice. However, even here we occasionally see some little result of our example and classes. Then, of course, there is one big result of our being here: All the little angels that are now busily praying for us, to say nothing of some of their mothers who are guarding the health of Dacca much more effectually than we could ever attempt to do.

From the Welfare Work, I was moved to the Mitford Hospital in Dacca to act as Superintendent of Nurses. This is a very well-built, large, and rather nice hospital, especially from the ex-

terior. It consists of eight buildings which have all recently been newly whitewashed and really look very nice and clean. Inside is not so nice; it is very difficult to keep Indian hospitals clean and tidy, but we are not so much troubled by relatives as the people in Rawalpindi.

A great deal of work goes on in the hospital. There are three out-patient departments, one for men, one for women and children, and one for coolies are rather better than the ordinary coolies—something like the ward orderlies at home, but with no education at all. Nevertheless, one would hardly like to have one of them caring for one's eyes—such is India!

We have a school for training nurses, Bengalis and Anglo-Indians. We have a number of Catholics now, a few Baptists, and the rest Hindus. After the three years general training,

Part of Class of "Dhais" or native midwives at the Dacca Health center in charge of our Sisters

eye diseases. Between them the number of patients seen per day runs into hundreds. We have three operating rooms; one for gynecology; there, one or two operations are done every day. In the general operating room there are about three or four major operations each day, to say nothing of frequent emergencies. In the eye operating room, every day there are several operations and quite frequently as many as 10 cataract operations in a day. The first day I made rounds there, I remarked on the excellent bandaging and was told, much to my surprise, that it was done by a coolie. "And," added my informant, "he has quite a large private practice." The hospital they go to Calcutta for their State examination and then return for six months midwifery training, and again go to Calcutta for the examination. There is a regulation course of studies for nurses in Bengal. It is not so easy, especially as most of them have not had sufficient education for the studies. Those who are educated look down very much upon nursing as menial work. However, as the Bengali girls are getting educated by degrees, we are gradually getting a better class of girls to take up nursing, but to train them properly we have to have the Sisters to supervise their work and also funds to enable us to take more nurses in to train.

TO INDIA AND BACK

By Sister Agnes Marie, R.N.

IN SEPTEMBER, 1925, I joined the little group that had just begun existence at the Medical Mission House. The first year rolled by swiftly and happily and peaceably. The second year was much like the first.

In October I set sail for India, the land of my dreams and hopes. In London I met Sister M. Laetitia, who had taken a C.M.B. course there. Together we went to Colombo, Ceylon, early in December. Within two weeks we were in the northern extreme of India. The hospital was scarcely completed, but we began to furnish it, and soon our lives, as Medical Missionaries, began in earnest.

An ever-increasing number of patients came, both to the dispensary and hospital. Soon we realized that we would have to increase our personnel, and as we were only too eager to give to the women of India, or at least those within our range, that which would help permanently toward their uplifting, we decided that there was no time like the present to put our plans of starting a training school for Indian nurses into effect. It did not take us long to see clearly and to understand more fully the advice of the Holy Father and other missionaries; viz, to educate and train the native people of the place and for them to take a large share in the progress of their own people. Amidst 320,000,000 people what can even hundreds of missionaries, with the best will in the world, do? More than once while in a teeming mass of people, in an Indian bazaar, I could not help but think, "What a huge, almost impossible task." The way to have the good work go on

steadily and perseveringly and to have it penetrate each city and hamlet is certainly to educate and train their own to do it. Thus we launched forth with high hopes. More than once our spirits were dampened, but never suffocated.

While we were holding down the fort at Rawalpindi, the Medical Mission House at home was enlarging. It outgrew one house after the other and naturally more of our older members were needed to take care of the work and especially to train the new recruits to the right religious and missionary spirit.

In 1930 I was recalled from India after spending nearly three of the happiest years of my life there. The realization that, if the Society wishes to send out good missionaries, the training of candidates must get the first consideration, took the edge off coming home.

Osteomalacia patient leaving the hospital after a Caesarian, saying goodbye to Sister Agnes Marie

As our Society was young and to a certain extent inexperienced in the ways of religious communities, and also for my own training, it was planned to send me to make a novitiate with an older and firmly established community, which like ours is devoted to active works of charity. This was considered very necessary, and I thought myself very privileged to be the one sent. The Congregation of Holy Cross, which has never failed to give a helping hand to our little community, offered to give us the benefits of its novitiate.

In the fall of 1930 I was sent to St. Mary's, Notre Dame, Ind., and there I was most kindly and cordially received and was treated as one of their own and given the same religious training as their novices. While there I realized, only more fully, that which Dr. Dengel had always maintained, that without the Society being impregnated with a deep and firm and lasting religious spirit, there could be little real missionary work. This spirit in the Society, with a high standard of medical efficiency, exercised solely to win souls to our Holy Faith and as a work of mercy, should, with the grace of God, do something at least towards the extension of Christ's Kingdom on this little globe of ours.

Quickly this valuable year rolled by, and with a gratitude, too deep for expression, to the Holy Cross Sisters, I returned to the Motherhouse in December, 1931, to take up my new work.

Here I found seven perfectly new candidates, who were eager to become missionaries.

Life is very busy here. The Candidates have two or three classes, mostly of a religious nature, daily, and they do some of the work to make the world go round here. Those who have completed their novitiate are engaged either in professional studies or in the work connected with the Society. Prayer, work, and study so completely fill the day that there is little time left for play outside the periods of recreation. This, however, makes for happiness of both spirit and body and our little family is busily engaged when most of the world is crying out for work.

The chapel with the Blessed Sacrament reserved, and in which we have daily Mass, is the center of the establishment.

Just now the landscape around the Medical Mission House, which is situated on the outskirts of the city of Washington, is like a miniature paradise, and the natural beauty of the place can not but help to draw souls closer to God, and our only wish is that more aspiring missionaries could enjoy it with us.

WORDS OF THE HOLY FATHER

THE second band of missionaries who left for India had the privilege of a private audience with the Holy Father.

A Sister of the party described the journey to the Orient and the audience with the Holy Father as follows:

"On the 13th of January, 1930, many of our friends, known and unknown, gathered in St. Patrick's Church, Washington, D. C., on the occasion of our departure ceremony to wish God-speed to us Missionaries who were sailing for India next day. Kneeling at the foot of the altar, we each in turn solemnly renewed the sacred promises of poverty, chastity, and obedience that we had made for the first time only three short weeks before.

"We left New York at midnight amid mist and rain and had the disappointment of not seeing the Statue of Liberty. We were not happy the first day or two—the sea, not content with being looked at, manifested a strange desire to rise up and have a look at us. This unmannerly behaviour quite upset us! Soon we were on friendly terms, however, which was fortunate, as it took us ten days to reach Naples.

"We arrived in Naples at night and did not realize its beauty till we viewed it from Amalfi Hill next morning. It captivated us, but we had no time to spend in Naples—our goal was the Eternal City. We had only one week in Rome, and we did what everybody else does who visits Rome. But there was one event which crowned our visit and made it different from what every-

body else does. We had the privilege of having a private audience with the Holy Father, just we four Medical Missionaries and the two Holy Cross Sisters with whom we were traveling. The Pope of the Missions gives all missionaries a special audience. We had the happiness of hearing from the Holy Father's own lips that our Society responds to his thought and desire; for, he added, in many cases souls can be reached only through bodies. The Holy Father emphasized that it is his great desire and ambition to have and to foster public interest in Medical Missions.

"Regretfully leaving Rome, we embarked at Naples for another 16 days at sea, during which, in the Red Sea, we had our first experience of the great heat and dazzling sunshine of the East. We reached Bombay at last. It seemed months since we had said good-bye to U. S. A. And we discovered for ourselves that India *is* hot. Going into the native city to purchase topees, we received so many impressions all at once that we could not sort them out. The streets were noisy and dirty and the many beggars picked us out as 'greenhorns,' at once. At Bombay we entrained for Rawalpindi, a two night's and a day's journey. It was what one might call dusty traveling, and coolies came in at the stations to sweep out the sand.

"At 4 a. m. on a cold, cold morning (Pindi is very far north) we arrived at our journey's end, to be afforded a warm welcome by our Sisters. They took us first to our little chapel, and there we thanked God that we had arrived 'home' at last."

LETTER FROM CARDINAL VAN ROSSUM

HIS EMINENCE CARDINAL VAN ROSSUM, the head of Propaganda fide, expressed his idea of the need of Medical Missions in the following letter to us:

PALACE OF PROPAGANDA,
Rome, May 14, 1929.

DR. ANNA DENGEL,
Superioress of the Society of
Catholic Medical Missionaries.

DEAR DR. DENGEL:

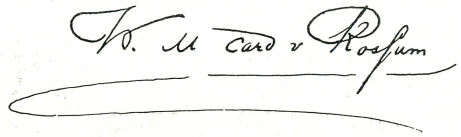
I was very pleased to receive a bound copy of your magazine, THE MEDICAL MISSIONARY, and I am very grateful for it. More than ever, this is the moment to extend as largely as possible the medical contribution to missionary work, not only for the good of the missionaries themselves who would live longer and do better and more work if they had the proper medical help and care, but also for the conversion of the pagan world.

The example of our divine Redeemer Who united Himself preaching with healing the sick and the word He spoke to the Apostles when He sent them forth preaching: "Curate infirmos qui apud illos sunt," show clearly how necessary is your contribution to the great work of extending the Reign of Christ on earth.

I am really satisfied with the development your providential initiative has taken, and I hope that this progress will continue always more: the needs in this regard are immensely above the help of which we dispose. Your work will excite many young people to follow your example and to devote themselves to this apostolate.

With all my heart I bless your work, and I ask the Divine Redeemer by the intercession of Mary Immaculate to give to this enterprise of supernatural charity the necessary support of divine grace so that the fruits may be more and more abundant.

Faithfully yours in Christ,



APPEALS FROM MISSION BISHOPS

ABOUT 30 mission bishops or their representatives from India, China, Japan, Africa and South America have written to us and several honored us with a visit. It was no small encouragement to hear over and over again from them that our Society was just what they needed. They asked us to send medical missionaries; but, of course, they realized that on account of the shortness of our existence, we could not yet supply the demand. We mention this as an introduction to the next paragraph.

The Future

There is a great field for Medical Missions. The mission bishops, with fatherly solicitude, are anxious to help their flock in suffering and trouble, and also to spread the mantle of Christian charity over the other sheep not yet of the fold. They want to establish hospitals and dispensaries and have the sick visited in their homes.

Oh! for a legion of medical missionaries! Young women glad to give their lives, not counting the cost of sacrifice, ready to go anywhere in the world to use the science and art of healing in the service of God for the sick and suffering.

The Motherhouse of the Society is in Brookland, Washington, D. C. There the candidates spend their time of probation and spiritual and missionary preparation, after which they take up their professional studies or training as the case

may be, unless they come to the Society already professionally prepared. Last year a beginning was also made in England, in order to make it possible for more candidates to join us. As the field is so large, it was planned from the very beginning to open the Society to all nationalities.

The Society admits besides those who are already doctors, pharmacists, or nurses, also young women who are desirous of devoting themselves to the care of the sick in the missions, and will in suitable cases provide for their professional studies or training. In addition, we wish to emphasize also the need of non-medical members. A Motherhouse and hospital is a little world in itself. There is the chapel, the office, the kitchen, the laundry, the sewing, the management of native help, the hundred and one things which have to be done to make the world go around. Every talent is most useful. Therefore, nobody desirous of helping the sick need be debarred from it, as the indirect work is needed just as much as the direct and is as important. Only those are allowed to do medical work or nursing who are qualified or trained to do so, otherwise there is no difference, all working together for the common good.

We hope, above all, that the second seven years will bring many co-workers from different countries. We shall welcome them most heartily to the Society.

Miss Pauline Willis, who enabled us to make a beginning in England by lending us her house in the country: St. Helen's, Winchcombe, Glo.

THE BABIES IN THE LIMELIGHT

By SISTER M. HELEN, R.N.

THE Baby Show was held last Monday, March 7. There were more babies present this year than ever before, about 600, and over 3,000 women and children. The judging of the babies was held in tents as the government buildings are not large enough to accommodate crowds of people. One small building was put at our disposal and we arranged a health exhibition in it. In one room we demonstrated the feeding, bathing and care of the baby; in another the ante-

At the Baby Welfare Exhibition

natal care of the mother, and in a third room a model delivery. In this same room in a darkened corner, screened off with bamboo mats, we had a patient lying on a dirty bit of sack cloth and a dirty *desi dhai* sitting beside her, her only instruments being a half cocoanut shell filled with mustard oil and a bit of bamboo for cutting the cord. No soap or water in evidence, of course, but in the corner a pot of burning coals to keep away the evil spirits. Unfortunately, we meet this latter type of delivery room daily and no doubt it was a familiar sight to most of the visitors, but we hope the contrast and the explanatory lectures made some impression. In the judging and awarding of the prizes we followed the scheme of last year, that of keeping the poor babies in a separate section as they are usually undernourished and cannot advantageously compete with babies from better class homes. Last year we had 75 babies in the poor section and this year 150. They represented the coolie, sweeper and beggar classes. The ordinary prizes given are silver medals, of which 12 were given to the 12 healthiest babies, but to this class we gave money prizes which were much more appreciated. We made up over a hundred bags of sweets and distributed a hundred dresses which were made by the convent school girls. Many of the mothers had two or three children, as well as a baby in arms, so we had to limit the dresses to just one member of the family. As our supply began to get low, several mothers feared there would be nothing left for them and they made a mad dash for the remaining dresses which they snatched from our hands. Needless to say, we did not attempt to recover them. There was so much shouting and hair pulling before the ownership was finally settled, and later, as we were going about the grounds, we were very amused to see boys of five and six years of age wearing a six months baby's dress.

A Prize Winner

We did a great deal of publicity work before the Baby Show this year and we were hoping to get a very large crowd. Although the attendance this year was larger than ever before, 600 is not such a large number, when one considers that the yearly birth rate of Dacca is 4,000. However, we are thankful for this number and we hope to increase it next year. There is no doubt that it does a great deal of good, when one remembers that many of these mothers are illiterate and never come in contact with any health propaganda, unless they are visited in their homes by a health visitor. True, there are health lectures held in various sections, but due to the purdah system which holds absolute sway among the Mohammedan section here, it is extremely difficult to get the women to come. Previous to the Baby Show, about 10 health lectures were given and, with the exception of one lecture which was especially for school girls and which was well attended, not one woman was present at any of the other lectures except our Sisters, Dr. Ganguly and several of the nurses from the hospital. With Dr. Ganguly's assistance, we are planning to give some strictly purdah health lectures in the near future.

The Baby Show is always strictly purdah, as the government grounds are surrounded by a brick wall 10 feet high. One would think that quite sufficient, but no, the garis had to drive inside the grounds and to prevent any indiscreet gari driver from gazing at the members of the fairer sex, a burlap curtain about eight feet in height was stretched along the entrance and there was an enclosed passageway leading to the tents. This arrangement necessitated a great deal of work, but one of the leading Mohammedans of the city insisted that nothing less would do. Someone suggested that to save labor and expense the gari drivers might be blindfolded, but this suggestion was not favorably received.

"THE CITY OF GOD"

The History and Life of the Virgin Mother of God Manifested to Ven. Mary of Jesus of Agreda

"The City of God" is a remarkable book, approved by Pius XI and recommended by Cardinals and Bishops. It contains a series of instructions dictated word for word by Our Lady to her servant, Blessed Mary of Agreda, a Spanish nun, whose body is still incorrupt after 250 years. It was translated from the Spanish by Rev. George Blatter, the author of the article on Afghanistan.

"The City of God," attractively bound, may be obtained in four volumes at $2.50 each, or in an abridged form at $3.00, from the Medical Mission House, Brookland, Washington, D. C.

AFGHANISTAN, MOHAMET'S LAST STRONGHOLD*

By Rev. George J. Blatter

HAVING reached Kabul, the goal of my journey, I sought arrangements for a protracted stay in spite of covered warnings. The winters up in this mountain region of nearly eight thousand feet are severe with frequent heavy snowstorms and bitter cold. Hearing that the government had assigned one of the buildings confiscated from the rebels in the late war, as a sort of lodging house or caravansary for all foreigners and receiving a hint that probably it would lessen misgivings or suspicions if I took up quarters there, I had my baggage transferred to one of the rooms in this wala. It was furnished with a spring bed, easy chair and table-desk. Privacy was almost impossible, as the flimsy doors could scarcely be closed and, it seems, holes had been bored above the door frames for the express purpose of listening. The floors in rooms and corridors were of rough brick; the windows without curtains or screens. Half a dozen natives were pothering around on the lower floor with the cook, who was trying to produce the semblance of European dishes on the primitive open woodfires or glowing charcoal. They furnished such poor imitations, that after a few weeks, I tried to get along with boiled eggs, tea and chapaties. They were willing enough but inefficient, though their Afghan manager, who spoke English well and with whom I remained on very friendly terms, tried his utmost to instruct and direct them. The only other guest with me was a young German, who it seemed was kept as a sort of hostage for final settlement of Afghan claims against a German business firm. Later I had as neighbor Mr. Russel and the little Jew, both Americans. Two Hindu agents for American automobiles from Delhi completed the number of guests during my entire stay. As the charges per day scarcely amounted to fifteen afghanees, about a dollar and a quarter, naturally this government hostelry was in much greater straits about its monthly budget than the budgets of so many nations nowadays. Once the minister of the treasury descended in towering wrath upon my friend the manager, protesting against this continual deficit, which had to be covered by the government. The manager simply resigned and two Hindus took his place.

From my window at the corner of the two, tree-shaded dusty streets, I could see much of the traffic entering the gates of the Ark, the government and royal grounds or park. The single gaudily accoutred military band blared past several times a day and could be heard from the Ark parade grounds often every day, for they are making great display of their uniformed army about a thousand strong or weak, as you like. A considerable number of automobiles are seen passing along among the one horse, two-wheeled Indian tongas, on which the passengers sit back to back with the driver. Many times I had to stop the continual lashing and whipping of the poor horses of the merciless tonga drivers. Behind a half ruined three-story business building of Amanulla's time, opposite the hostelry was quite a pretentious mosque and on the other corner to the right opposite, was another half destroyed building adjoining the wide grounds and one story complex of the public high school. About six or seven hundred feet behind and to the left of the hostelry, the old city, with its narrow bazaars and swarming Afghan populace, spread out on both sides of the dry river bed. Many of the quasi European buildings around the hostelry and through the parks were partially ruined or greatly damaged by the recent captures of Kabul by Abibulla, Bacha Bazouk and Nadir Khan, after the flight of Amanulla.

During the first evening at the hostelry an agent of the Ark interviewed me about my personal affairs and the object of my visit to Kabul. I made no secret of my being a Catholic priest, adding that I was an author and publisher of several books of travel, religion, and two epics, Theotokia and Spuren and philosophy and that I wished to find an opportunity of establishing a medical dispensary for women and children. I wore the clerical collar throughout my stay and a few times wore my cassock. This agent continued to seek interviews several times and gave me the impression, that he was appointed to keep track of my doings, until their misgivings were allayed. Any open proselytizing of course, or any effort to convert good Mohammedans, would result in opposition or some fanatic outbreak, like in all Mohammedan centers. Toleration of such efforts would require a shorter or longer period of residence of a priest to allay suspicion and prejudice. This is proved by experience in Turkey and Persia, as well as in other Mohammedan countries. My quiet residence in Kabul was evidently the right beginning and a necessary preliminary for future missionary work in Afghanistan. Soon I began to celebrate Mass in private, and thus added the precise act, which, from a supernatural view, is the ultimate aim and object of all and any missionary work anywhere, and which had been the main and specific purpose of the Afghan foundation and of my journey to Afghanistan. I gratefully acknowledge the great help and blessings of the Almighty, of Jesus Christ, and of the saints in overcoming the many difficulties, obstacles and dangers connected with the undertaking.

During my stay I mixed freely with the people. Often I passed through the several bazaars and the narrow broken streets, lined with windowless and almost doorless mud walls. The native

* Continued from May number.

language is Pushtu, but the Persian is used in the upper circles and is generally also understood by the people. I had studied Persian, but naturally book study of any language furnishes poor facility for intercourse until it is supplemented by considerable practice.

During the first weeks of my stay one of the nearby mountain tribes revolted, and soon the streets swarmed with armed men, called in to suppress it. But even these wild men gave me no cause for apprehension and laughed at my efforts to make myself understood. The rebels must have been subdued without mercy, for soon the city and surrounding roads were filled with troops of these men conducting herds of spoil-laden donkeys and domestic animals as their share of the booty. Later a number of the leaders were tied to the mouth of canons and blown to fragments. As I feared to give scandal, I did not accompany my fellow guests to the nearby execution grounds, but plainly heard the loud cannon shots heralding the dread ending of the rebels.

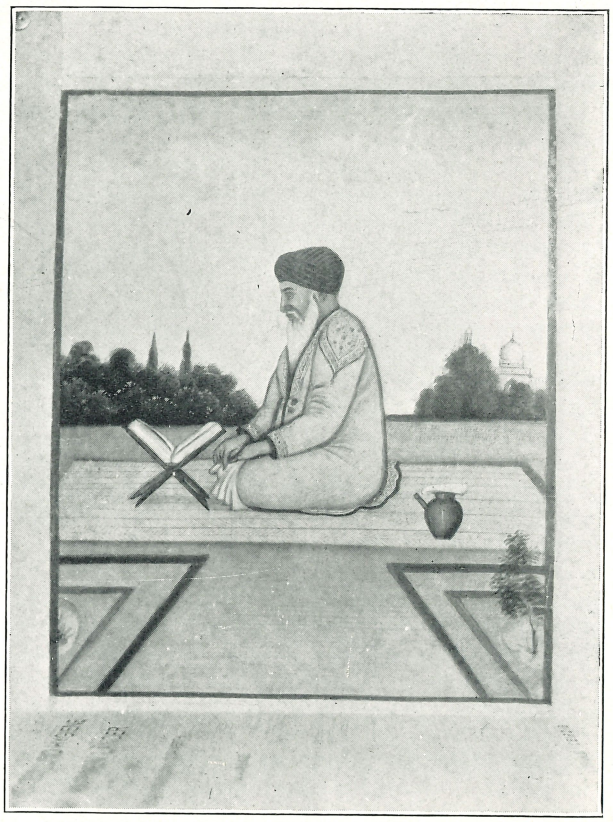
I received an official request for an interview from the minister of foreign affairs, in which I had an opportunity to discuss the Christian religion and vitessent philosophy on points which touched also the moslem faith. He showed himself quite interested. I proposed also the project of establishing a dispensary for women and children through the Catholic Medical Missionary Society in Rawalpindi. He gave only a qualified assent, acknowledging that it was a commendable project and worthy of further consideration. Later on I visited the Kabul hospital, consisting of some one-story buildings near the Russian embassy and containing perhaps a score of men patients, but no accommodation for women. The rumor was spread that the government was preparing part of the compound for the reception of women and children. But under Mohammedan laws and customs I do not see how such a woman's hospital could be arranged or kept going. There are no nurses nor any women doctors, and the treatment of women patients by men is repugnant to all moslem sense of propriety.

The Afghans like to engage in religious discussion and seem readily to yield to logic; but their logic is founded entirely on that written jumble which they claim is the authentic record of Mohamet's teaching.

Mr. Bogen introduced me on a formal visit to the father-in-law of the King, a typical and venerable Mohammedan Afghan, who spoke a little English. We had quite a discussion about the Trinity and about Christ: the one he insisted on calling three gods and the other as a mere woman-born man, but a prophet secondary only to Mohamet. Strangely enough, he and other Moslems maintain that Christ will judge men at the end of the world. With great ado and show of veneration he gave me a magnificently bound English translation of the Koran. He wrapped it carefully in a costly silk scarf and kissed it devoutly, demanding a promise that I would handle it with utmost care in reading it.

I had several talks with some of the officials connected with the government and met the prime minister, the minister of war, and of education and the treasurer, the editor of the only paper that is published now who also sought interviews. I received an invitation to the royal durbar or festive reception, held in the parks of the Ark by Nadir Khan and after the speech of the king at the concluding ceremonies, he approached me to shake hands and expressed his good wishes and the hope that I found my stay pleasant. An official visit to the premier and to the king, which was to be arranged, was unfortunately cut short by a sickness, threatening to be fatal, which forced me to leave Kabul. Thus in every way and by everybody I was made to feel quite welcome and no objection, only certain misgivings about my own safety were expressed in regard to a protracted stay in Kabul on my part.

In September the manager of the hostelry took sick of a deathly attack of malaria and several times I had no doubt it would end fatally. He had been very friendly with me and showed considerable sympathetic understanding of the Catholic religion. As there were no screens on doors or windows in the hostelry and he occupied a neighboring room, it was inevitable that the mosquitoes transmit the malaria parasite to the guests. Mr. Russell was soon brought down with



MOHAMMEDAN READING THE KORAN

the sickness for several weeks but, under treatment of Dr. Pauschart, of the German legation, and of Dr. Elliot, of the British, recuperated sufficiently to continue his journey to Kandahar and Herat. Unfortunately I took little heed, trusting to a strong constitution. In the second week of October I was so saturated with malaria that I lay helpless and nearly unconscious, expecting the end. Dr. Pauschart and Elliot found the blood full of parasites, and only after five strong injections my condition was somewhat improved. They assured me that I was threatened with a complication of typhoid, heart disease and malaria and that my only chance of recovery was to leave as soon as possible for the lower altitudes. Even so a complete restoration was doubtful and would require continued dosing with quinine.

Through the kindness of Mr. Machonackie I found passage on the British legation lorry on its trip for supplies to Peshawar. The morning was bitterly cold, but, by the time we had overcome the two mountain passes, the noon and afternoon sun shed a friendly warmth. We passed the moonlit night in a caravansary not far from Jelalabad. A bevy of Moslem kept up the unearthly singsong or rather howling in discordant and ever-varying chorus, in honor of Allah to repel the invading gins or demons. It was nothing new after listening to it so many nights in old Kabul. At three in the morning we passed Jelalabad; at nine we crossed the border and climbed the Khyber pass, arriving at the parish residence a little after ten in the forenoon. It was a record passage, no doubt, so arranged by the friends, who had procured for me a place on the legation lorry.

For some time I continued taking quinine, and after apparent recovery, I sought return to Kabul. However, all efforts to obtain a pass during the winter and spring proved vain. All this time I was a guest of Father Joseph Devlin, paying him a proper compensation. With him and Father Donohoe I made a summer excursion from Rawalpindi and Murree into delightful Kashmir, stopping with Father de Ruyter, who is maintaining a school or college in Baramulla near Srinagar on the Jhelum river. For two weeks I said Mass at Gulmurg, the out-station of Father Stewart of Srinagar. Once more I returned to Peshawar in a vain attempt to get a pass of Kabul. Finally I left for Bangalore, two thousand miles south, where I gave a report of my stay in Kabul to the Apostolic Delegate and deposited with him a sum of money for the first priest that should be my successor as resident in Afghanistan. During my sojourn of one year in Rome and half a year in France and Germany seeking the Afghan visa, I had been in continued communication with the Propaganda Fide in regard to this enterprise and I had obtained all the extra faculties from the Congregation Sacramentorum. On my last day in Kabul, I mailed a short notice to the Papal Secretary, Cardinal Gasparri, reporting my protracted residence in Afghanistan and its cutting short because of dangerous illness. His Excellency, Msgr. Mooney, the Apostolic Delegate of India, had been notified from Rome to take up this matter, and in consequence I had received several letters from the delegation.

The secretary awaited me at the station and provided quarters for me during a few days stay at Bangalore. His Excellency was pleased to receive my report and the sum of money I offered for one year's maintenance of the priest who was to succeed me as resident in Kabul. It had already been arranged to follow up this Kabul enterprise by sending a priest as soon as possible, perhaps from Karachi, which was in prospect of being erected into a diocese including Sindh, Baluchistan and Afghanistan as territory.

As several months of my leave of absence from Chicago still remained, I visited Madras, and crossing the Indian Ocean, the Malayan Peninsula, nearly two thousand miles to Singapore, and thence to Sumatra and Java, in Oceanica. As I had only British money and the banks for a time would not exchange it, when the sterling slumped, I had to cut short my travels. I returned by way of Colombo and back by another way to Karachi not so far from Old Kabul. I had already travelled by air from Palembang in Sumatra to Batavia in Java, and now decided to take the Imperial Airways from Karachi, India, to Italy. But this trip over the vast desert stretches of Baluchistan, Persia, Iraq, Arabia, Palestine, the Mediterranean and Grecian Islands, Athens, and over the Adriatic to Brindisi, proved neither pleasant nor safe. Twice the airship was forced to return hundreds of miles to evade dangerous storms. I had prepared to find a watery grave in the Adriatic on the tempest tossed hydroplane during the last lap of the flight. But I arrived in Rome to make my report to the Holy Father in a private audience on January 20, 1932. Though entering my seventy-second year, I am ready at any time to return to the capital of Afghanistan, if that should become necessary for following up this beginning in the future. I was assured, however, that others will continue the mission begun.

Promote Medical Missions by subscribing to "The Medical Missionary." Subscription, $1 a year. Address, "The Medical Missionary," Brookland, Washington, D. C. Subscription abroad, 5 shillings a year. Address, "The Medical Missionary," St. Helen's Winchcombe, Glo., England.

This being a double number, the next issue will appear in October.